- Preventive interventions for the general population through programmes for Blood Safety, voluntary counselling and Testing services, Prevention of Parent to Child Transmission Services, Information, Education and Communication (IEC) and awareness building among adolescents and sensitization for the AIDS Vaccine Initiative.
- Provision of low cost care and support services by providing community care services, treatment of opportunistic infection and prevention of occupational exposure.
- Collaborative efforts to promote inter-sectoral co-ordination activities including workplace interventions and public-private partnerships.
- Building technical and managerial capacities for programme implementation through Surveillance, Training, Monitoring and Evaluation, Technical resource groups, operational research and Programme Management.

Emergency wards in Hospitals

1311. SHRI SHAHID SIDDIQUI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the action taken against the doctors and hospital staff refusing admission to people brought in critical condition to the emergency wards of the hospitals; and

(b) whether there is a concrete plan to improve the condition of emergency wards of the hospitals as most of the accident victims are brought in a very critical condition?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Based on the Supreme Court directive instructions have been issued by this Ministry to all the States/Union Territories/Central Government Hospitals/Institutions to the effect that all accident victims whose condition is morbid/serious should be admitted even if beds are not available and in no case the patient be left unattended for want of vacant beds in the emergency/casualty department.

(b) Upgradation of medical facilities in Central Government Hospitals is a continuous process and it has been a constant endeavour of the Government to provide the best possible medical facilities within the available resources. A trauma Center, namely, Jai Prakash Naryan Trauma Center at All India Institute of Medical Sciences is under construction and a new 60 bedded ernergency ward has been commissioned recently at AIIMS. A proposal for expansion and upgradation of existing casualty and emergency services of Dr. Ram Manohar Lohia Hospital has also been approved. Apart from this all Central Government Hospitals are equipped to attend the accident and trauma cases. In addition, Central Government is also providing financial assistance to the State Governments for upgradation and strengthening of Emergency facilities of State hospitals of towns/cities located on National Highways.

Rise in brain fever cases

1312. DR. DASARI NARAYANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of cases of Japanese Encephalitis or brain fever reported in various parts of the country during the current calender year, State-wise and the number of deaths caused in each State;

(b) whether it is a fact that the cases of brain fever are consistently rising; and

(c) the remedial measures Government propose to take to fackle this horible disease?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) The number of Japanese Encephalitis (JE) cases and deaths reported during current calendar year, State-wise, is given in the enclosed Statement (*See* below)

(b) Decline in JE cases during 2000, 2001 and 2002 had been recorded as compared to those during 1999. However, there is a marginal increase in JE cases in 2003 as compared to those in 2002.

(c) Prevention and control of JE has been included in integrated scheme for National Vector Borne Disease Control Programme (NVBDCP) approved by the Cabinet Committee on Economic Affairs